

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

File with:
 Iowa Ethics and Campaign
 Disclosure Board
 510 E. 12th Ste 1A
 Des Moines, Iowa 50319
 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.
 Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization)
Campaign to Elect JAN BORTSCHELLE

IMPORTANT: Indicate by # type of committee you are reporting for 5
 (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
 (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
 Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name JAN Bortschelle Political Party (if applicable) DEMOCRAT
 Office Sought DICKINSON County Recorder District (if Senate or House)

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Bonnie Duhr Treas 712-336-1997 Oct 18, 2010
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A October 19, 2010 REPORT FOR: (1) ELECTION / (2) NON-ELECTION YEAR
 (report date) Indicate by # 1

- ☐ CHECK IF AMENDMENT TO REPORT DATED _____
☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
 (You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election
November 2, 2010
 County & Local Committees, enter County in which Election is held
DICKINSON

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed) \$ 0

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 749⁰⁰

Schedule F: Loans Received total (Attach Schedule F) _____

Schedule H: Total Sales of Campaign Property (Attach Schedule H) _____

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL..... \$

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (*also see debts and loans below) 742⁰⁰

Schedule F: Loan Repayments total (Attach Schedule F) 7⁰⁰

CASH ON HAND at the end of this reporting period (if final report balance must be zero) \$

**UNPAID BILLS (From Schedule D - Attach Schedule D) \$

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year

For Instructions, See Back of Form

Reset Form**SCHEDULE**

A
ev 07/03)

MONETARY RECEIPTS

☐ CHECK THIS BOX IF
AMENDING FORM**CONTRIBUTIONS -- MONEY TAKEN IN**
(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

CAMPAIGN TO ELECT JAN BORTSCHELLE

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD

CAUTION: Section 88B 32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees

DATE RECEIVED (MM/DDYYR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	* IF FOR FUND- RAISER INCOME
9-8-10	ID# CK#	Jan Bortscheller 902 24th St Spirit Lake, IA 51360	Self	\$500 ⁰⁰	<input type="checkbox"/>
9-12-10	ID# CK#	Bjornstad Law Office PO Box 305 Spirit Lake, IA 51360		50 ⁰⁰	<input type="checkbox"/>
10-13-10	ID# CK#	Paul Hedberg 16310 Highway 86 Spirit Lake, IA 51360		50 ⁰⁰	<input type="checkbox"/>
10-13-10	ID# CK#	Jan Bortscheller 902 24th St Spirit Lake, IA 51360		149 ⁰⁰	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$749 ⁰⁰	
TOTAL (if last page of this schedule)				\$749 ⁰⁰	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

[Redacted]

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONEY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9-13-10	ID# CK#	Dickinson Co Auditor 1802 Hill Ave Spirit Lake IA 51360	list of voters	\$25.40
9-24-10	ID# CK#	Tri State Litho 2005 Aurora Ave Spirit Lake, IA 51360	Postcards Magnets	299.60
10-13-10	ID# CK#	KU00 3160 18th St Spirit Lake IA 51360	Radio Ads	168.00
10-14-10	ID# CK#	Dick Co Cable News PO 213 Mulsford IA 51351	TV Ads	130.00
10-14-10	ID# CK#	Lakes News Shopper PO Box 192 Mulsford IA 51351	Newspaper Ads	119.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$742.00
TOTAL (if last page of this schedule)				\$742.00

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(j).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

[Redacted]

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9-13-10	ID# CK#	Dickinson Co Auditor 1802 Hill Ave Spirit Lake IA 51360	list of voters	\$25.40
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	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$742.00
TOTAL (if last page of this schedule)				\$742.00

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 86A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

~~Committee~~ to Elect Jan Bortscheller
CAMPAIGN

Reset Form

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
07/01/93	Larry & Jan Bortscheller 902- 24th St. Spirit Lake, Iowa 51360	Husband & Self	Campaign Yard Signs	\$ —	<input checked="" type="checkbox"/>
			Saved from Previous Campaign		<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$	
TOTAL (if last page of this schedule)				\$	0

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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